			LKK:
INS. CASE OWNER:	MAY CHUA	CC4/FCI19022233/Fda3	IDAC:

ASSIGNMENT

Surveyor:	RAM	DOI:	Date / Time : 17/12/2019
			Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. :	SHA 1020K	Claim No. : D19007900MFSH
Name of Insured :	COMFORT TRANSPORTATION PTE LTD	Policy No. : D-19092580MFSH
Insured Tel No. :	HP:	Make / Model : HYUNDAI IONIQ
Excess Sec II :S$	D.O.A : 12/12/2019 19:30	Place of Accident : ALONG SIMS AVE EAST

Is driver the owner? (YES / NO) Nature of Accident :

If **NO**, Driver Name / Age : GOH HIN KOON   OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :   (V/L: YES / NO) Insured Liability :   %   **Final ? Yes / No**

SHC 6418D →

INSRS: WSP: PREMIER Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time		STAGE	DATE / PIC
	SHC 6418D - CC3/III18019825/K1pa3q2; DOA:29.10.18	Non-Reporting ltr (1st):	
	-CC3/III16023928/H1eb3q2; DOA: 12.12.16	Non-Reporting ltr (2nd):	
	SHA 1020K - CS/FCI19003112/R1sd3s2; DOA: 11.02.19	Non-Reporting ltr (Final):	
	- CS/FCI18021664/Aqbn2; DOA: 30.11.18	Notification ltr (if non-pickup):	
	- CC4/ASM18017220/K1pa3q2; DOA: 19.09.18	Call OI:	
		After call ltr to OI:	
		Documentation Check List: Handler Typist	
		Notification ltr (if non-pickup)	
		After call ltr to OI:	
		Authorisation To Act:	✓
		Release Voucher:	✓
		Final Repair Bill:	✓
		Car Rental Invoice:	✓
		Towing Invoice	
		LTA / GIA :	
		Medical Bill:	
		PIR:	
		Mandate/Reject Instruction:	✓
		LOD	✓
		Payment Breakdown Form:	
PRELIMINARY ADVICE Date/Time:	Sent By:	Post-Repair Photos:	
		Others:	

FINALIZATION	Date/Time:	Confirm with:	Confirm by:	
Repair Cost:	S$ 700.00 (3 days) Reduction: 65 %		Email ☐ Call ☐	

FINAL SETTLEMENT	Date/Time: 14/07/2020	Confirm with: Vincent Chua	Email ✓ Call ☐	
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 15		If NO or B 28, Ass. Lia :	
Repair Cost: (w/GST)	S$ 749.00			
Loss of Rental (LOR):	S$ 300.00 (3 days) X $100			
Loss of Use (LOU):	S$ - ($ x days)			
Loss of Income (LOI):	S$ 150.00 ($50 x 3 days)			
LOR only ☐ LOU only ☐ LOR + LOU ☐ LOR + LOI ✓ [Tick only one]				
GIA/LTA Search	S$ -			
Medical:	S$ -		1) Claim status: Normal/Reject/Private Settle	
Disbursement:	S$ -	(e.g. Tow/ Independent)	2) Report Format: TP	
Legal Cost	S$ -		3) Survey fee: $350	
Total:	S$ 1,199.00	**Global Sum S$:** 1,190.00		

FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐	
Payee 1:	S$ 1,190.00	Name 1: Premier Automotive Services Pte Ltd		
Payee 2: (Strike if N.A.)	S$	Name 2:		
Payee 3: (Strike if N.A.)	S$	Name 3:		